

Ministerial Credentials Program & School of Ministry



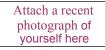
New Horizons Ministries 3905 S. Elm Place Broken Arrow, OK 74011 Phone: 918.258.6220 Ex.4 Fax: 918.258.3317 E-mail: nhmsom@gmail.com Web: www.nhmiphc.com

> "Equipping and Releasing Ministers and Churches Into Divine Destiny"

COMPLETE THE FOLLOWING PAGES TO SUBMIT APPLICATION.

THANK YOU.

©2019 New Horizons Ministries, all rights reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted in any form or by any means—for example, electronic, photocopy, and recording— without the prior written permission of the publisher.



MINISTERIAL CREDENTIAL TRANSFER APPLICATION

New Horizons Ministries Conference Office The International Pentecostal Holiness Church, Inc.

3905 S. Elm Pl., Broken Arrow, OK 74011

Office: 918.258.6220 Fax: 918.258.3317 Email: nhmsom@gmail.com

OUR MISSION:

Equipping and Releasing Ministers and Churches into Their Divine Destiny

This form is to be completed by all candidates applying for ministerial credentials. It is to be returned to **New Horizons Ministries RDC**. <u>All questions are to be answered clearly and fully</u>. PLEASE PRINT WITH BLACK INK OR USE A TYPEWRITER. If sufficient room is not found on the form for a complete answer to any question, please use the back of the page or a separate sheet of paper.

Name	(First)		(Middle)		(Last)		
Address							
City/State/Zip							
Phone: (F	Home)		(Office)				Email Address
Date of Birth	Pla	ce of Birth		Nationali	ty		Citizen? Yes No so, give details on separate sheet of paper.
ی Male ش Sex:	Female ڤ		Social Security	No. (Send p	ohotocopy)	1	Anniversary Date
Current Marital Status: Single Married Divorced * Widow/er *Please include a copy of each divorce decree and give details of each divorce along with circumstances; use separate sheet of paper.							
Spouse's Name	(First)	(Middle)		(Last)		
Spouse's Date of I	Birth:			Spou	ise's Social Secu	rity Nu	mber:
Do you/your spot	ise have any pi	ior marria	ges? Applican	t Yes N	o Spouse I	Yes No	
How was the mar	riage terminat	ed? Appli	cant Divorce W	ridowed A	nnulment Spous	se Divo	rce Widowed Annulment
Name and Ages of Children NameAgeNameAge							
Have you ever been charged and/or convicted of a felony or misdemeanor (excluding minor traffic offenses)? Yes No If yes, explain:							
Have you ever been accused of child molestation, child abuse, assault, or sex offenses of any nature? Yes No If yes, explain the nature of accusation, charge or conviction – use separate sheet of paper							
Are you a member of a secret society such as the Masonic Lodge or Scottish Rite? Yes No							
You are responsible for obtaining and including with this application the following: 1. Current Credit Report (Contact Conference Office for instructions, if needed) 2. Photocopy of Social Security Card 3. Photocopy of Divorce Decrees for both Candidate and Spouse, when applicable.							

How long have you been a member of the IPHC?	
Location of church membership	
Have you previously held credentials with the IPHC, of If yes, what credential level? Local Church Minister If yes, when/with whom? What was required of you to receive this credential?	or another denomination/organization? Yes No Licensed Minister Ordination
Has your spouse previously held credentials with the I Local Chu If yes, when/with whom What was required to receive this credential?	IPHC, or another denomination? Yes No rch Minister Licensed Minister Ordination
-	initial evidence of speaking with other tongues (Acts 2:4)? Yes No
Do you know without a doubt that you are called into	Christian ministry? Yes No
What is your ministry calling? Pastor Evangelist	Teacher Other (explain)
Type of ministry in which you are currently engaged	
Give a brief summary of your experience in church lea	ıdership
Have you been baptized in water according to Matthe	w 28:19? Yes No
Have you been sanctified and are you being sanctified Please give a brief explanation.	? Yes No
If you are applying for a Local Church Minister's Cert Yes No	tificate, do you understand you are amenable to your pastor and local church?
Are you a faithful and consistent tither? Yes No	(Please include tithing record for the past year)
Will you cooperate with the denominational program includes reporting systematically and consistently on forms j	ns at the local, conference and general levels (and lead your people by example?) (The provided.) Yes No
	vailable for training, instruction, information and inspiration (i.e. continuing educational Yes No
Have you read the BIBLE through at least once? Ye	es No
Do you believe the BIBLE to be the inerrant Word of	God? Yes No
Have you read the IPHC 2017-2021 Manual? Yes	No
Have you ever, for any reason, been dismissed from an If yes, explain, giving the name of the organization and the	
If you reach a place where you are out of harmony ordination certificate to your conference superintende	with the ministry vision of the IPHC, will you surrender your local church/license, ent? Yes No
Are you in agreement with the Covenant of Commitm	nent of the IPHC? Yes No
Are you in agreement with the Articles of Faith of the	IPHC: Yes No
	y by diligence, by uprightness in business matters, by ministerial ethics and courtesy, b ice of evil, by cherishing the anointing of the Holy Spirit, even unto death? Yes No
<i>Please include a typed answer on a separate sheet of pap</i> Why do you want to pursue ministerial credentials and	
Signature of Applicant	Date of Application

MINISTERIAL CREDENTIAL TRANSFER SURVEY

Church Attending

Current Credential Level:
Local Church Minister License
Ministerial License
Ordination
Credential Organization
Person of Contact for above mentioned Credential Organization
How long have you been credentialed?
Reason(s) for Transfer
Reason(s) for choosing New Horizons Ministries and International Pentecostal Holiness Church
Plans for ministry/service
r lans for ministry/service

INFORMATION AUTHORIZATION AND RELEASE

I, the undersigned, having filed an application for credentials with the **NEW HORIZONS MINISTRIES** (herein referred to as "Conference") of the International Pentecostal Holiness Church consent to have an investigation made as to the conduct of my personal affairs, my moral character, professional reputation, fitness for the ministry, and such further information as may be received by or reported to the above-named Conference. I agree to give any further information that may be required in reference to my past history.

I authorize and request every person, firm, company, corporation, governmental agency, court, association, church, educational facility, or institution having control of any documents, records, and other information pertaining to me to furnish to the Conference of the International Pentecostal Holiness Church any such information, including documents, records, or other information regarding charges or complaints filed against me, formal or informal, pending or closed, and to permit the above-named Conference or any of its agents or representatives to inspect and make copies of such documents, records, and other information.

I hereby release, discharge, and exonerate the Conference of the International Pentecostal Holiness Church, its agents and representatives and any person furnishing information from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records, and other information or the investigations made by or on behalf of the above-named Conference. The Conference of the International Pentecostal Holiness Church shall not be required to verify any information received during the course of its investigations, and shall not be liable for acting on the basis of any information which later appears to have been false or incomplete.

I have read and signed the foregoing Authorization and Release as my own free act and deed.

	Signature	
STATE OF	COUNTY OF	
Subscribed and sworn before me this day of	, 20	
	Notary Public	
My commission expires:		
My commission number is:		

CONFERENCE OFFICE USE ONLY

Date received in conference	e office		
Approved	Deferred	Denied	
Local Church Minis	ter's Certificate 🛛 Minister's L	icense Certificate of Ordination Certificate	atement
Date applicant notified	_//	Certificate/Card – mailed/awarded _	//
Superintendent's Signature			
If applicant is a ministerial Office.	transfer (from another de	nomination) complete and forward thi	s form to the General Superintendent's
I 🗆 do 🗖 do not appro	ove this transfer. Complete	ed on this day of	, 20
General Superintendent's S	ignature		
(0	Original will be returned to confe	erence and a copy will be retained by the General	l Superintendent.)

STATEMENT OF DECLARATION AND TITHING COMMITMENT

A. Tithes and Reports:

- 1. Licensed/Ordained Ministers
 - a. All Licensed/Ordained ministers are required to give a full tithe (10%) of all income) monthly into the conference treasury, the missionary fellowship treasury or general treasury, according to membership status, and to report monthly on forms provided. It is important to tithe on all sources of income without seeking any exceptions.
 - b. Those not on salary are to tithe on a projected income monthly, to be adjusted on annual inventory.
 - c. Ministers are allowed to deduct travel expenses incurred in the ministry, not otherwise subsidized, and tithe the balance of their income.
- 2. Ministers who do not comply with the tithing rule shall be dealt with in the manner listed in the 2017-2021 Manual of the International Pentecostal Holiness Church.
- 3. Local Church Minster's License
 - a. Those with Local Church Minister's Certificate are amenable to the local church where they hold their membership and shall tithe their income to the local church treasury.
 - b. They shall report to the conference office annually on forms provided. Failure to do so will result in the forfeiture of their license.
 - c. Any person with a Local Church Minister's License pastoring a church, shall be amenable to that respective conference, tithe monthly into the conference treasury, and report to the conference monthly.
- B. All ministers are eligible to join the General Retirement Program (Tax Sheltered Annuity).
- C. Ministers who pastor a church are required to put forth every effort possible to get their church to support the general tithe, conference budget, and the retirement program.

As a candidate for Local Church Minister's License, Minister's License, or Ordination in NHM of the IPHC, I make the following declarations and declare them to be true.

I have read the Manual of the International Pentecostal Holiness Church and agree with the Articles of Faith and doctrinal statements.			
I have read the International Pentecostal Holiness Church Manual, understand the government structure of the church and will abide by such structure as it is now or shall be in the future as mandated by the IPHC General Conference.			
I will preach the Word as Paul admonished Timothy (2 Timothy 4:2).	Y	N	
I believe that life is a sacred trust to each individual and to all of mankind and therefore do not agree with abortion, with the exception of the endangerment of the life of the mother.	Y	N	
I believe that the morality of the Bible is a divine mandate for each believer to strive for, not just a suggested guideline.	Y	N	
I have been charged or convicted of child abuse or molestation. (If yes, please explain in detail on the back of this form.)	Y	N	
I believe that homosexuality or lesbianism is an unacceptable lifestyle and I am not a practicing homosexual or lesbian.	Y	N	
I understand the tithing policy of the IPHC and New Horizons Ministries. As a licensed or ordained minister or pastor, I will freely send my tithe monthly to the Conference Office. As a Local Church Minister, I will tithe to the local church.	Y	N	
I understand I must accumulate 48 Continuing Education Credits every two years to maintain my credentials.	Y	N	
I understand that I am to be loyal to the IPHC and to New Horizons Ministries of which I am a part by attending all General and Conference functions or providing written explanation for my absence.	Y	N	
If I am assigned a pastorate in New Horizons Ministries conference, I will not, under any circumstances, influence the congregation I am pastoring to separate from New Horizons Ministries. Further, I will do everything in my power to make sure such never occurs.	Y	N	
I will surrender my credentials to the NHM Conference Superintendent if at any time I find my beliefs or lifestyle out of harmony with that of the IPHC Manual By-Laws and NHM By-Laws and Constitution.	Y	N	

This is to certify that I have read the financial commitment and Statement of Declaration of New Horizons Ministries of the International Pentecostal Holiness Church, as outlined above, and hereby sign this statement that I will diligently attend to these requirements. If, and/or when these requirements change by vote of the Conference, I promise to adhere to such changes.

Signature of Applicant

Witness

Date Signed

Date Signed

MUST BE INCLUDED WITH APPLICATION

SEND TO:

New Horizons Ministries 3905 S. Elm Pl. Broken Arrow, OK 74011